

BUSINESS LICENSE COMMISSION

COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET LOS ANGELES, CA 90012 (213) 974-7691

www.board.co.la.ca.us/blc



March 26, 2015

Steven Martin Katz SMK Corporation DBA Vicenzo's Newhall Pizza 24504 ½ Lyons Ave. Newhall, CA 91321 MEMBERS
SARA VASQUEZ
PRESIDENT
RENÉE CAMPBELL
VICE-PRESIDENT
SHAN LEE
SECRETARY
JAMES BARGER
COMMISSIONER
GENEVIEVE MORRILL
COMMISSIONER

HEARING ON APPLICATION FOR ENTERTAINMENT-GEN. W/DANCE/SC & ANNUAL DANCE/SC BUSINESS LICENSE ID #141796

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday**, **April 8, 2015** at **9:00 a.m**. in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS

You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost. In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either a professional/certified interpreter or other person who is <u>fluent</u> in both English and your native language. If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.

Sincerely,

SARA VASQUEZ President

Lupe Duron Commission Staff

NOTICE TO PRINTER STATE LAW REQUIRES THAT THIS LEGAL ADVERTISEMENT SHALL BE SET

IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE: Z 91085

NEWSPAPER:..... ANTELOPE VALLEY PRESS

PUBLISH 3 TIMES

1 ST	PUBLISHING DATE:	03/12/2014
2 ND	PUBLISHING DATE:	03/19/2014
3 RD	PUBLISHING DATE	03/26/2014

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

ENTERTAINMENT-GEN. W/DANCE/SC & ANNUAL DANCE/SC

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:	24504 1/2 LYONS AVE
	NEWHALL, CA 91321
NAME OF APPLICANT:	SMK CORPORATION / DBA VINCENZO'S
	NEWHALL PIZZA / STEVEN M. KATZ
DATE OF HEARING:	04/08/2015
TIME OF HEARING:	09:00 A.M.

"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO"

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION 500 W. TEMPLE STREET, RM 374 LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR **BUSINESS LICENSE SECTION** 225 N. HILL STREET RM. 109 LOS ANGELES, CA 90012





225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012

BUSINESS LICENSE APPLICATION REFERRAL SUMMARY SHEET

KIND OF BUSINESS: ENTERTAINMENT-GEN. W/DANCE/

ADDRESS OF BUSINESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321

TELEPHONE: (661) 259-6733

OWNER OF BUSINESS: STEVEN M KATZ

CAL. DR. LIC#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: VINCENZO'S NEWHALL PIZZA

MAILING ADDRESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

		•	<u>APPROVED</u>	DATE	SIGNATURE
	1.	Animal Care & Control			
	2.	Risk Management			
• X	3.	Building & Safety	YES	03/04/15	tchen
×X	4.	Fire Department	YES	02/06/15	tchen
	5.	Public Health		•	Sec
· 🔀	6.	Treasurer & Tax Collector	YES	02/13/15	tchen
X	7.	Business License Commission	-		
	8.	Sheriff Department	***************************************		
×X	9.	Regional Planning Commission	YES	02/03/15	tchen
	10.	Weights and Measures			
X	11.	Publishing	YES	03/12/15	tchen
	12.	Public Works - EPD			
4 X	13.	Sheriff Fingerprint	YES	02/10/15	tchen

Conditions:





225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012

BUSINESS LICENSE APPLICATION REFERRAL SUMMARY SHEET

KIND OF BUSINESS: ANNUAL DANCE/SC

ADDRESS OF BUSINESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321

TELEPHONE: (661) 259-6733

OWNER OF BUSINESS: STEVEN M KATZ

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: VINCENZO'S NEWHALL PIZZA

MAILING ADDRESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

			APPROVED	DATE	SIGNATURE
	I.	Animal Care & Control			
	2.	Risk Management			
X	3.	Building & Safety	YES	03/04/15	tchen
X	4.	Fire Department	YES	02/06/15	tchen
	5.	Public Health			
X	6.	Treasurer & Tax Collector	YES	12/13/15	tchen
X	7.	Business License Commission			
	8.	Sheriff Department		•	
X	9.	Regional Planning Commission	YES	01/29/15	tchen
	10.	Weights and Measures	-		
X	11.	Publishing	YES	03/12/14	tchen
	12.	Public Works - EPD			
X	13.	Sheriff Fingerprint	YES	02/10/15	tchen

Conditions:



Los Angeles County Treasurer and Tax Collector

Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ 2330.00

1D# 141796

\$ ************************************	BU2	INESS INFORN	MATION		
Type of Business:	1	Address of Busines			
1-	_	24504 42	Lyons	AU E	
Dance, Ent, W/I	Dance	Business Telephone	»·		
DBA (Business Name):		Mailing Address:	<u> </u>		
VINCENZOSI	Newhall	24,504 1/2	Lyons	AUR	Newhall CA 913
Sellers Permit # (State Board of Equa		026345-	74		
Business Ownership Structure: If LLC or Corporation, the information	Single Ov	vner Partnersh	ip LLC	_ Corporation	·×_
Date of Incorporation: SM I/ Cor	20-07:00	Incorporated in the	State of: C	211 For wi	A
Exact Corporate Name:					
Names of Officers		Addresses	CA 9132 4		Titles
Steven HATZ			-		
		-		****	·
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	APPL	ICANT INFORT	MATION		
Applicant's Full Name:				waters to	
	EN PW	2VL'9 NE	<u></u>		····
Home Address					,
Home Telephone:	Cell Phone:		Email addres		
				•	
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Social Security #:	Date of Birth:		Place of Birth	1:	<u> </u>

Driver's License or State ID#:			Expiration Dat	:e: <i></i>	/
Male Female Heigh	, Wei	gh. H	air Color	<u>.</u> Eye Col	or
-					
The information contained herein is a license applied for, I agree to submit		, ,	-	-	
license in accordance with regulation	7	-	• •	•	•
used in connection therewith in confe					inguity in the they we
·		-			None.
Date: JW 20, 2014	Applicant's S	ignature:(_		\	
Access to the second se	lls) 	20 1
Application taken by:	いい			Date: 🕽	AU 28 15

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GEN. W/DANCE /SC
ADDRESS OF BUSINESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321
TELEPHONE: (661) 259-6733
OWNER OF BUSINESS: STEVEN M KATZ
CAL. DR. LIC.#:
NAME OF PERSON FINGERPRINTED:
FICTITIOUS NAME: VINCENZO'S NEWHALL PIZZA
MAILING ADDRESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321
DATE THAT YOU STARTED BUSINESS:
PREVIOUS OWNER'S NAME, IF KNOWN:
THIS IS AN APPLICATION FOR: NEW LICENSE
BUILDING & SAFETY SANTA CLARITA
APPROVAL DENIAL
RECOMMENDATION: We Commend appearal.
SIGNATURE: O. Hamved DATE: 3/2/15_

DATE 01/29/15

BASIC LICENSE NO. 8346

IDENTIFICATION NUMBER 141796

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

ADDRESS OF BUSINESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321			
TELEPHONE: (661) 259-6733			
OWNER OF BUSINESS: STEVEN M KATZ			
CAL. DR. LIC.#:			
NAME OF PERSON FINGERPRINTED:			
FICTITIOUS NAME: VINCENZO'S NEWHALL PIZZA			
MAILING ADDRESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321			
DATE THAT YOU STARTED BUSINESS:			
PRÉVIOUS OWNER'S NAME, IF KNOWN:			
THIS IS AN APPLICATION FOR: NEW LICENSE			
BUILDING & SAFETY SANTA CLARITA			
APPROVAL DENIAL			
RECOMMENDATION: We commend approval.			
· · · · · · · · · · · · · · · · · · ·			

BASIC LICENSE NO. 8298

KIND OF BUSINESS: ANNUAL DANCE /SC

DATE 01/29/15

IDENTIFICATION NUMBER 141796

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Nov-08-2014 01:30pm Frum-LACOFD FIRE WARSHAL

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COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

223 N. Hill Street Room 109, P.O. Box 54970, Lon Angeles, CA 90054-0970

124

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BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GENERAL /SC

ADDRESS OF BUSINESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321

TELEPTIONE: (661) 259-6733

OWNER OF BUSINESS: STEVEN M KATZ

CAL DR LICH:

NAME OF PERSON FINGERPRINTED!

FICTITIOUS NAME: VINCENZO'S NEWHALL PIZZA

MAILING ADDRESS: 24504 1/2 LYONS AVE. NEWHALL, CA 91321

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF ICHOWN:

THIS IS AN APPLICATION FOR:NEW LICENSE

FIRE DEPARTMENT LA COUNTY

APPROVAL,		DENIAL
•	r	

BASIC LICENSE NO. 8352

DATE 10/3/14

IDENTIFICATION NUMBER 141796

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COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REVERRAL

124

KIND OF BUSINESS: ANNUAL DANCE /SC
ADDRESS OF BUSINESS: 24504 1/2 LYONS AVE, NEWFLALL, CA 91321
TELEPHONE: (661) 259-6733
OWNER OF BUSINESS: STEVEN M KATZ
CAL. DR. LIC#:
NAME OF PERSON FINGERPRINTED:
FICTITIOUS NAME: VINCENZO'S NEWHALL PIZZA
MAILING ADDRESS: 24504 1/2 LYONS AVE, NEWHALL, CA 91321
DATE THAT YOU STARTED BUSINESS:
PREVIOUS OWNER'S NAME, IF KNOWN:
THIS IS AN APPLICATION FOR NEW LICENSE
P Miner Production and the Company of the Company o
FIRE DEPARTMENT
LA COUNTY
☐ APPROVAL ☐ DENIAL
RECOMMENDATION:

BASIC LICENSE NO. 8298

SIGNATURE: F.S-# 124 Bapel Piney Starry

DATE 01/29/15

IDENTIFICATION NUMBER 141796

DATE: ___

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS	S: 24504 1/2 LYONS AVE,	NEWHALL, CA 9132	21
TELEPHONE: (661) 259-	6733		
OWNER OF BUSINESS:	STEVEN M KATZ		
CAL. DR. LIC.#:			-
NAME OF PERSON FINC	SERPRINTED:		,
FICTITIOUS NAME: VIN	CENZO'S NEWHALL PIZ	ZA	
MAILING ADDRESS: 24	504 1/2 LYONS AVE, NE	WHALL, CA 91321	
DATE THAT YOU STAR	TED BUSINESS:		
PREVIOUS OWNER'S NA	ME, IF KNOWN:		
THIS IS AN APPLICATIO	N FOR:NEW LICENSE		
	TREASURER &	TAX COLLEC	TOR
	APPROVAL		DENIAL
RECOMMENDATION: _			
SIGNATURE:		DATE:	5-5-15
BASIC LICENSE NO. 8298	DATE 01 /2	29/15	IDENTIFICATION NUMBER 141796

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: EN	FERTAINMENT-GEN. W/DAN	CE/SC	
ADDRESS OF BUSINESS:	24504 1/2 LYONS AVE, NE	WHALL, CA 91321	
TELEPHONE: (661) 259-6	733		
OWNER OF BUSINESS: S	TEVEN M KATZ		•
CAL. DR. LIC#:			
NAME OF PERSON FING	ERPRINTED:		
FICTITIOUS NAME: VIN	CENZO'S NEWHALL PIZZA		
MAILING ADDRESS: 245	04 1/2 LYONS AVE, NEWH	ALL, CA 91321	,
DATE THAT YOU START	ED BUSINESS:		
PREVIOUS OWNER'S NA	ME, IF KNOWN:		
THIS IS AN APPLICATION	N FOR:NEW LICENSE		
	TREASURER & TA		
į	APPROVAL	☐ DENIAL	•
RECOMMENDATION: _			
SIGNATURE:		date: 2-515	
SIGNAL ORDER		DATE: 0.076	

DATE 01/29/15

IDENTIFICATION NUMBER 141796

BASIC LICENSE NO. 8346

ZONING REFERRAL

TO:	CITY OF SANTA CLARITA COMMUNITY DEVELOPMENT/PLANNING 23920 VALENCIA BLVD., STE # 140 SANTA CLARITA, CA 91355 TREASURER TAX COLLECTOR BUSINESS LICENSE SECTION 23757 VALENCIA BLVD SANTA CLARITA CA 91355 FAX (661) 945-3512	PLANNING APPROVALAS JARKELS SUBJECT TO ALL APPLICABLE SECURATION OF THE UNIFIED DEVELOPMENT CODE CITY OF SANTA CLARITA COMMUNITY DEVELOPMENT PLANNING DIVISION
DATE:	1-26=15	ac 14-1857
TYPE OF	BUSINESS(ES)	ntertainment w/Dance
		ì
ADDRES	s of Business 2450472	LYDUS AUG
CITY	New har	ZIP CODE 9/321
NAME OF	OWNER BALLOSSYL	SMK COrporation
"DBA"	MINCENTAS	TEL. #: (
MAILING	ADDRESS ABOURDED AND ASSA	SAME
EXISTING	GUSE YES(K) NO()	
	RMITTED IN ZONE 3 CP	USE NOT PERMITTED IN ZONE
REMARK	S	
	SIGNATURE OF ZONING OFFICER	1. /26/15

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

15.00129

KIND OF BUSINESS: AN	NUAL DANCE /	SC			
ADDRESS OF BUSINESS	: 24504 1/2 LYO	NS AVE, I	NEWHALL,	CA 91321	
TELEPHONE: (661) 259-	6733				·
OWNER OF BUSINESS:	STEVEN M KAT	Z			
CAL. DR. LIC.#:					
NAME OF PERSON FINC	ERPRINTED:				
FICTITIOUS NAME: VIN	CENZO'S NEW	HALL PIZZ	A		
MAILING ADDRESS: 24:	504-1/2 LYONS	AVE, NEW	HALL, CA	91321	
DATE THAT YOU STAR	TED BUSINESS:				
PREVIOUS OWNER'S NA	AME, IF KNOWN:				
THIS IS AN APPLICATIO	N FOR: NEW LIC	CENSE			
	SHE		NGERP OUNTY	RINT	,
	APPROVA	L		DENIAL	
RECOMMENDATION:	A PRAONE	·()	-		
SIGNATURE:	LLO	5346	h	DATE: 2/10/15	
BASIC LICENSE NO. 8298		DATE 01/29	1/25	IDENTIFICATION NUMBER	
14-01370	- B 10/29		12	Scared KCTOMY	215

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225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

15.00128

KIND OF BUSINESS:	ENTERTAINMENT-GEN.	W/DANCE /SC	
ADDRESS OF BUSINE	ESS: 24504 1/2 LYONS AV	E, NEWHALL, CA	91321
TELEPHONE: (661) 2:	59-6733		
OWNER OF BUSINES	S: STEVEN M KATZ		
CAL. DR. LIC.#:			
MAILING ADDRESS: DATE THAT YOU STA	VINCENZO'S NEWHALL F 24504-1/2 LYONS AVE, ARTED BUSINESS:	•	<u>:1</u>
		F FINGERPRI A COUNTY	NT
	APPROVAL	, "ma	DENIAL
RECOMMENDATION	ApproxED		
SIGNATURE:	Szeur	DA DA 101/29/15	TE: Z(10)15 IDENTIFICATION NUMBER 141796
BASIC LICENSE NO. 83	01370 - 13 101		Somed TIC Tony 415